

and tradeoffs regarding the best way to place and fashion the cavopulmonary anastomoses. This excellent analysis of the early and late results of the intracardiac lateral tunnel Fontan procedure will serve well as a basis for comparisons with the other surgical modifications.

Dr Stamm. Thank you very much for your comments, Dr Danielson.

With respect to your first question, I would like to refer to Dr Mayer's excellent presentation in the postgraduate course that

immediately preceded this meeting, in which he explained in detail the technique that is currently used at Children's Hospital. My understanding is that we prefer not to suture the intra-atrial baffle to the crista terminalis itself, being aware of the possible increased incidence of arrhythmia that might result.

With respect to your second question, we did indeed study whether the incision in the roof of the right atrium had an impact on the incidence of sinus node dysfunction, which it did not have. We will add that information to the manuscript.

Notice of correction

In the October 2000 issue of the *Journal*, in the article by Alexiou and associates titled "Double-Barreled Conduit for Right Atrioventricular Connection in Tricuspid Atresia: A New Technique" (2000;120:820-2), an error was made. On page 821 the company name "Shelhigh" was misspelled "Shelheigh" (first paragraph, first and third lines).